Orlando Credit Union

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Written Statement of Unauthorized Debit

1. Account/Transaction Information			
Member Name		_ Account Number	
Company Name		Company ID	
Date:	Amount:		
Date:			
Date:	Amount:		
2. Statement			
(ACH) debit to my account following, to the best of my	; the debit was not authorized, o ability to identify, is the reason zed signer on the above-referen	nave reviewed the circumstances of the above electronic or did not conform to the terms of my authorization; and the for that conclusion. For business accounts: I further ced account or have corporate authority to act on the	
Originator is Not Known or	Authorized by Receiver (Memb	ber) to Debit the Member's Account (R10)	
3. I did not authorize the c	ebit to my account.		
I did not authorize the I do not have a relation The signature on the so	city of the Originator that debited Originator to debit my account. ship with the Originator that del surce document is not authentic citten authorization is not auther	bited my account. or authorized. (ARC and BOC)	
Customer (Member) Advis	es Entry is Not in Accordance v	with the Terms of the Authorization (R11)	
4. I authorized the party li authorization.	sted above to debit my account	t, but the entry does not conform to the terms of my	
My account was debited A debit to my account to The debit is part of an in The source document volument volumen	vas ineligible. (ARC, BOC or POF d to the Receiver. (ARC, BOC or	authorized. s improperly reinitiated. P)	

<u>Authorization Revoked by Customer (Member) (R07) ACH payment was authorized; however, authorization is revoked. Member signature is required. Return must be within 60 days of the settlement date)</u>

5.	I authorized the party listed above to debit my account, but:
	I revoked the authorization I had given to the party to debit my account before the debit was initiated. Other (must specify)
<u>Dı</u>	uplicate Presentment (R37)
6.	Merchant presented paper check and an ACH debit for the same transaction.
	The electronic and the source document have presented for payment.
7.	Other -RCK, TEL, WEB
	Other (Must be specific)
_	
	Signature
th I h	am an authorized signer; or otherwise have authority to act, on the account identified in this statement. I attest that be debit above was not originated with fraudulent intent by me or any person acting in concert with me. I ave read this statement in its entirety and attest that the information provided on this statement is true and prizect.
Si	gnature
Da	ate

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